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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Lalvani et al.

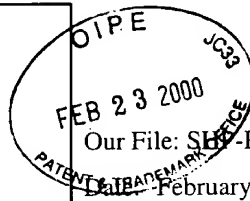
**Application No.:** 09/308,725

**Filed:** May 24, 1999

**For:** ASSAY METHOD FOR PEPTIDE  
SPECIFIC T-CELLS

**Group:** Not Yet Known

**Examiner:** Not Yet Known



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**ASSOCIATE POWER OF ATTORNEY**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Pursuant to 37 C.F.R. § 1.34, please recognize as an associate attorney or agent in this  
application to the following:

Mary J. Wilson, Esquire      Reg. No. 32,955

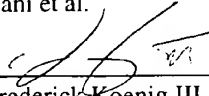
Please mail all correspondence to:

Mary J. Wilson, Esquire  
Nixon & Vanderhyde, P.C.  
8th Floor  
1100 North Glebe Road  
Arlington, VA 22201-4714

Respectfully submitted,

Lalvani et al.

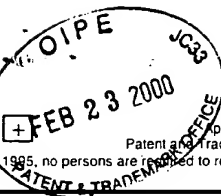
By

  
C. Frederick Koenig III, Esquire  
Registration No. 29,662  
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PTO/SB/21 (6-98)  
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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/308,725	
	Filing Date	May 24, 1999	
	First Named Inventor	Lavani et al.	
	Group Art Unit	Not Yet Known	
	Examiner Name	Not Yet Known	
Total Number of Pages in This Submission	3	Attorney Docket Number	SHP-PT045

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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) Associate Power of Attorney and Change of Correspondence Address.
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	C. Frederick Koenig III, Esquire Volpe and Koenig, P.C.	Reg. No. 29,662
Signature		
Date	February 18, 2000	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: February 18, 2000		
Typed or printed name	C. Frederick Koenig III, Esquire	
Signature		Date 2/18/00

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